# Case 24-80163 Document 114 Filed in TXSB on 12/11/24 Page 1 of 9

Fil	I in this information	to identify your c	ase:								
D	Debtor 1	Jamison	Hamlin	Dyer							
		First Name	Middle Name	Last Name							
	Debtor 2 Spouse, if filing)							Charl	k if this is:		
(0	spouse, ii iiiiig)	First Name	Middle Name	Last Name					amended filing	1	
L	Inited States Bankru	uptcy Court for th	e: <b>Sout</b>	hern District of	Texas	<u> </u>	-	_	supplement sho		tpetition
_	Case number f known)	24-8016	3-G-13								e following date
(1	i kilowii)							<u></u>	M / DD / YYYY	_	
_	· · · · -	4001						IVII	WI/DD/IIII		
U1	fficial Form	<u> 1061</u>									
<u>S</u>	chedule I:	Your In	come								12/15
spo add	ouse is not filing wit litional pages, write	h you, do not in	filing jointly, and your s clude information about case number (if known	your spouse. If m	ore s	pace is ne					
1.	Fill in your emplo information.	yment		Debtor 1	1			ı	Debtor 2 or nor	n-filing sp	oouse
	If you have more t	than one job,	Employment status	<b></b> Employed	ı 🗆 N	lot Employ	ed	□E	mployed $\square$ No	t Employe	ed
	attach a separate information about employers.	page with	Occupation	Agricultur							
	Include part time,	seasonal, or	Employer's name	RD Orchar	ds						
	self-employed wo	rk.	Employer's address	54 Kingsw	hoo						
	Occupation may in or homemaker, if i			Number Stre				Num	nber Street		
				Westwood	l <b>,</b>						
				City		State	Zip Code	City		State	Zip Code
			How long employed the	nere?						_	
Pa	art 2: Give Deta	ils About Mor	nthly Income								
	Estimate monthly unless you are se		ne date you file this form	. If you have nothi	ng to	report for a	ny line, write	\$0 in the s	pace. Include y	our non-f	iling spouse
	If you or your non- more space, attac		ve more than one employeet to this form.	yer, combine the ir	ıforma	ition for all	employers fo	or that perso	on on the lines	below. If y	you need
						Fo	r Debtor 1		btor 2 or ing spouse		
2.		•	, and commissions (befor		2.		\$0.00		\$0.00		
3.	Estimate and list	monthly overtim	ne pay.		3.	+	\$0.00	+	\$0.00		

4. Calculate gross income. Add line 2 + line 3.

\$0.00

\$0.00

Debtor 1 Jamison Hamlin Dyer Case number (if known) 24-80163-G-13 First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$0.00 \$0.00 Copy line 4 here..... List all payroll deductions: \$0.00 \$0.00 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. \$0.00 \$0.00 \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. Specify: \$0.00 \$0.00 5h. \$0.00 \$0.00 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$0.00 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total **\$5,461.00** \$0.00 monthly net income. 8a \$0.00 \$0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 settlement, and property settlement. 8c. \$0.00 \$0.00 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$0.00 \$0.00 8f. Specify: \_ \$0.00 \$0.00 8g. Pension or retirement income 8g. \$1,200.00 \$0.00 8h. Other monthly income. Specify: Income from All Other 8h. Sources- Family mineral \$6,661.00 \$0.00 estimated - varies with Calculate monthly income. Add line Tordidection and pricing Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse \$6,661.00 \$0.00 \$6,661.00 10 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$6,661.00 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain: management company to help manage the Galveston, Texas property to generate income from the Airbnb. Debtor anticipates an increase in income from the Airbnb within the next two months. Debtor will get "side jobs" and also work overtime to make the payments.

☐ No.

The income from the oil royalties will begin within the next month. Debtor is in the process of hiring a new

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Debtor 1 **Jamison** Hamlin Dyer Case number (if known) 24-80163-G-13 First Name Middle Name Last Name 8a. Attached Statement **Business Income-RD Orchards** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$4,700.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Ordinary and necessary expense \$0.00 Net Employee Payroll (Other than debtor) \$0.00 **Payroll Taxes** \$0.00 **Unemployment Taxes** \$0.00 5. Worker's Compensation \$0.00 6. 7. Other Taxes \$0.00 8. Inventory Purchases (Including raw materials) \$0.00 Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$89.00 13. Repairs and Maintenance \$0.00 14. Vehicle Expenses \$0.00 15. Travel and Entertainment \$0.00 16. Equipment Rental and Leases \$0.00 17. Legal/Accounting/Other Professional Fees \$0.00 18. Insurance \$0.00 19. Employee Benefits (e.g., pension, medical, etc.) \$0.00 20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 21. Other Expenses \$800.00 Fuel \$200.00 Food TOTAL OTHER EXPENSES \$1,000.00 \$1,089.00 22. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$3,611.00

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Debtor 1	Jamison	Hamlin	Dyer	Case number (if known) 24-80163-G-13
	First Name	Middle Name	Last Name	
8a. Attache	d Statement			
			Rental Income- Galveston	
1. Gr	oss Monthly Income:			\$2,350.00
2. TC	TAL EXPENSES			\$500.00
3. AV	ERAGE NET MONT	HLY INCOME		\$1,850.00

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Debtor 1	Jamison	Hamlin	Dyer	Object White is
	First Name	Middle Name	Last Name	Check if this is:  An amended filing
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	A supplement showing postpetition chapte expenses as of the following date:
United States Ban	kruptcy Court for the:	Sc	outhern District of Texas	
Case number (if known)	24-80163-G	i-13		MM / DD / YYYY

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Househol	d					
1. Is this a joint case?  ✓ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a sep ☐ No ☐ Yes. Debtor 2 must file	parate household? • Official Form 106J-2, <i>Expenses for</i>	<sup>r</sup> Separate Household of Debtor 2.				
Do you have dependents?     Do not list Debtor 1 and Debtor 2.     Do not state the dependents' names.	✓ No ☐ Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?  No. Yes.  No. Yes.  No. Yes.  No. Yes.  No. Yes.		
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ <sub>Yes</sub>					
Part 2: Estimate Your Ongoing  Estimate your expenses as of your ba	<u> </u>	using this form as a supplement in a	a Chapter 13 cas	e to report expenses as of a		
date after the bankruptcy is filed. If this Include expenses paid for with non-casuch assistance and have included it of	sh government assistance if you k	now the value of		ur expenses		
The rental or home ownership exp for the ground or lot.	enses for your residence. Include f	first mortgage payments and any rent	4	\$0.00		
If not included in line 4:						
4a. Real estate taxes			4a	\$1,200.00		
4b. Property, homeowner's, or ren	ter's insurance		4b	\$450.00		
4c. Home maintenance, repair, an	d upkeep expenses		4c	\$200.00		
4d. Homeowner's association or co	4d. Homeowner's association or condominium dues 4d. <b>\$0.00</b>					

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Debtor 1 Jamison Hamlin Dyer Case number (if known) 24-80163-G-13

Last Name

First Name

Middle Name

First Name Middle Name Last Name		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$250.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$179.00
6d. Other. Specify: Heating Oil in Maine	6d.	\$150.00
7. Food and housekeeping supplies	7.	<u>\$450.00</u>
3. Childcare and children's education costs	8.	\$0.00
2. Clothing, laundry, and dry cleaning	9.	\$100.00
0. Personal care products and services	10.	\$100.00
11. Medical and dental expenses	11.	\$100.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$450.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$150.00
14. Charitable contributions and religious donations	14.	\$80.00
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$0.00
15b. Health insurance	15b.	\$0.00
15c. Vehicle insurance	15c	\$200.00
15d. Other insurance. Specify:	15d.	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	\$0.00
17b. Car payments for Vehicle 2	17b.	\$0.00
17c. Other. Specify:	17c.	\$0.00
17d. Other. Specify:	17d.	\$0.00
8. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
19. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$350.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$150.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	or 1 <b>Jamison</b>	Hamlin	Dyer	Case number (if known	24-80163-G-13
	First Name	Middle Name	Last Name	_	
21.	Other. Specify: See Add	ditional Page		21. +	\$300.00
22.	Calculate your monthly e	expenses.			
	22a. Add lines 4 through	21.		22a	<u>\$4,859.00</u>
	22b. Copy line 22 (month	ly expenses for Debtor 2),	if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add line 22a and 22l	b. The result is your month	ly expenses.	22c	<u>\$4,859.00</u>
23.	Calculate your monthly r	net income.			
	23a. Copy line 12 (your c	ombined monthly income)	from Schedule I.	23a	<u>\$6,661.00</u>
	23b. Copy your monthly e	expenses from line 22c abo	ove.	23b	<u>\$4,859.00</u>
	23c. Subtract your month	ly expenses from your mo	nthly income.		
	The result is your m	onthly net income.		23c	<u>\$1,802.00</u>
24.	Do you expect an increa	se or decresse in your ex	penses within the year after you file	this form?	
24.	For example, do you expe	ect to finish paying for you	r car loan within the year or do you ex e of a modification to the terms of you	spect your	
	✓ No. ☐ Yes.				

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Debtor 1 Jamison Hamlin Dyer Case number (if known) 24-80163-G-13
First Name Middle Name Last Name

	Amount
6c. Telephone, cell phone, Internet, satellite, and cable services	
Cell Phone	\$60.00
Internet	\$79.00
Streaming Services	\$40.00
21. Other	
Tax Reserve \$300	\$0.00
Pet Expenses	\$200.00
Travel Expenses	\$100.00

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Fill in this information	to identify your case:		
Debtor 1	Jamison	Hamlin	Dyer
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankr	uptcy Court for the:	Sc	outhern District of Texas
Case number (if known)	24-80163-G	-13	

Check if this is an amended filing

## Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Did yo	u pay or agree to pay someone who is NOT an attorney to help you fill	out bankruptcy forms?
<b>√</b> No		
Yes	s. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
<b>X</b> <u>/</u>	penalty of perjury, I declare that I have read the summary and schedules/ s/ Jamison Hamlin Dyer mison Hamlin Dyer, Debtor 1 ate 12/11/2024 MM/ DD/ YYYY	es filed with this declaration and that they are true and correct.